



LT Environmental, Inc.
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Arvada Colorado 80003
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October 30, 2018

Ms. Alexis North
Office of Enforcement, Compliance & Environmental Justice
EPA Region 8
1595 Wynkoop Street (8ENF-AT)
Denver, CO 80202-1129

**RE: NSPS Subpart OOOOa Report
Mustang Creek Operating, LLC**

RECEIVED

NOV 5 - 2018

Office of Enforcement, Compliance
and Environmental Justice

Dear Ms. North,

LT Environmental, Inc. (LTE) is submitting on behalf of Mustang Creek Operating, LLC (Mustang Creek) the attached report for NSPS Subpart OOOOa for the 2017/2018 reporting period. This package includes the appropriate portions of the EPA provided reporting template, as well as a signed certification of completeness by a responsible official.

Please feel free to contact me at 303-704-1066 or cdimarco@ltenv.com if you have questions.

Sincerely,

LT ENVIRONMENTAL, INC.

(b) (6)

Chris DiMarco
Project Air Quality Scientist

cc: Scott Goldsmith - Mustang Creek Operating, LLC



Responsible Official

Name: (Last) Falk (First) Roger (MI) W

Title Vice President

Street or P.O. Box 5251 DTC Parkway, Suite 800

City Greenwood Village State CO ZIP 80111 -

Telephone (303) 923 - 2487 Ext. Facsimile (303) 751 - 9210

Certification of Truth, Accuracy and Completeness (to be signed by the responsible official)

I certify under penalty of law, based on information and belief formed after reasonable inquiry, the statements and information contained in these documents are true, accurate and complete.

Name (signed) (b) (6)

Name (typed) Roger W. Falk Date: 10 / 26 / 2018

48 CRR Part 50: Standards of Performance for Crude Oil and Natural Gas Facilities for which Construction, Modification or Reconstruction Commenced After September 16, 2015 - 90.5429b(c) Annual Report
For each affected facility, an owner or operator must include the information specified in paragraphs (b)(3)(i) through (iv) of this section in all annual reports.

The asterisk (*) next to each field indicates that the corresponding field is required.

SITE INFORMATION										ALTERNATIVE ADDRESS INFORMATION (IF NO PHYSICAL ADDRESS AVAILABLE FOR SITE *)			REPORTING INFORMATION		PI Certification	ADDITIONAL INFORMATION		
Facility Record No. * (Print value with automatic facility identifier if a value is not entered.)	Company Name * (90.5429b-01.00)	Facility Site Name * (90.5429b-01.00)	US Well ID or US Well ID Associated with the affected facility, if applicable. * (90.5429b-01.00)	Address of Affected Facility * (90.5429b-01.00)	Address 2	City *	County *	State Abbreviation *	Zip Code *	Responsible Agency Facility ID (State Facility Identifier)	Description of Site Location (90.5429b-01.00)	Latitude of the Site (Decimal Degrees to 5 decimal using the North American Datum of 1983) (90.5429b-01.00)	Longitude of the Site (Decimal Degrees to 5 decimal using the North American Datum of 1983) (90.5429b-01.00)	Beginning Date of Reporting Period * (90.5429b-01.00)	Ending Date of Reporting Period * (90.5429b-01.00)	Please provide the file name that contains the certification signed by a qualified professional engineer for each closed vent system routing to a control device or process. * (90.5429b-01.00) Please provide only one file per record.	Please enter any additional information.	Please associated the name reference.
e.g. ABC Company	e.g. XYZ Compression Station	e.g. 12 345 6789 10	e.g. 123 Main Street	e.g. Suite 100	e.g. Brooklyn	e.g. Kings County	e.g. NY	e.g. 11233	e.g. 7 miles NE of the intersection of Hwy 123 and Hwy 456		e.g. 24.12345	e.g. 40.12345	e.g. 70.12345	e.g. 10/1/2018	e.g. 06/30/2018	e.g. Certification.pdf or XYZCompression.pdf		e.g. additional.pdf or XYZCompression.pdf
1 Mustang Creek Operator Gateway 3-03		05-038-06688	Wellbore: 57135 RTSM GPM		Armed	Elbert	CO	80522	1/2 mi N of CR 12 and 171		(b) (9)			6/1/2018	6/1/2018			

40 CFR Part 60 - Standards of Performance for Crude Oil and Natural Gas Facilities for which Construction, Modification or Reconstruction Commenced After September 18, 2015 - 40.5439a(b) Annual Report

For the collection of fugitive emissions components at each well site and the collection of fugitive emissions components at each compressor station within the company-defined area, an owner or operator must include the records of each monitoring survey including the information specified in paragraphs (b)(7)(i) through (b)(7)(v) of this section in all annual reports:

The asterisk (*) next to each field indicates that the corresponding field is required.

Facility Record No. * (Select from dropdown list: view record or add new)	Identification of Each Affected Facility * (40.5439a(b)(2))	Date of Survey * (40.5439a(b)(7)(i))	Survey Begin Time * (40.5439a(b)(7)(ii))	Survey End Time * (40.5439a(b)(7)(ii))	Name of Surveyor * (40.5439a(b)(7)(iii))	Ambient Temperature During Survey * (40.5439a(b)(7)(iv))	Wx Conditions During Survey * (40.5439a(b)(7)(v))	Maximum Wind Speed During Survey * (40.5439a(b)(7)(vi))	Monitoring Instrument Used * (40.5439a(b)(7)(vii))	Components from Monitoring Plan (If none, state none) ** (40.5439a(b)(7)(viii))	Type of Component for which Fugitive Emissions Detected * (40.5439a(b)(7)(ix))	Number of Each Component Type for which Fugitive Emissions Detected * (40.5439a(b)(7)(x))	Type of Component Not Reported as Required in 40.5439a(b)(7)(ix) * (40.5439a(b)(7)(xi))	Number of Each Component Type Not Reported as Required in 40.5439a(b)(7)(ix) * (40.5439a(b)(7)(xii))
e.g. 0001 Site ABC	e.g. 1234567	e.g. 10/01/2015	e.g. 10:00 am	e.g. 12:00 pm	e.g. John Smith	e.g. 70°F	e.g. Sunny, no clouds	e.g. 2 mph	e.g. Company ARI optical gas imaging camera	e.g. None	e.g. Storage tank shell hatch	e.g. 1	e.g. None	e.g. 0
1 California 3-01		9/1/2015 10:00am	10:00am	10:00am	(b) (6)	81 clear	01 clear	10 mph	IR Camera	None	Storage tank shell hatch	1	None	0
1 California 3-01		9/1/2015 10:00am	10:00am	10:00am		81 clear	01 clear	10 mph	IR Camera	None	Storage tank shell hatch	1	None	0

Type of Difficult-to-Monitor Component Monitored *	Number of Each Difficult-to-Monitor Component Type Monitored *	Type of Unable-to-Monitor Component Monitored *	Number of Each Unable-to-Monitor Component Type Monitored *	Date of Successful Repair of Fugitive Emissions Component *	Type of Component Placed on Delay of Repair *	Number of Each Component Type Placed on Delay of Repair *	Explanation for Delay of Repair *	Type of Instrument Used to Resurvey Required Components Not Repaired During Original Survey *	Compressor Station Affected Facility Only		
									Training and Experience of Surveyor *	Was a Monitoring Survey waived under § 60.5.2914g(2)? *	If a monitoring survey was waived, the calendar months that make up the quarterly monitoring period for which the monitoring survey was waived *
e.g. VMS	e.g. 1	e.g. Value	e.g. 1	e.g. 11/18/16	e.g. Value	e.g. 1	e.g. Unable to repair until next shutdown	e.g. Company ABC optical gas imaging camera	e.g. Trained Thermographer, completed 40-hour course at XYZ Training Center. Has 10 years of experience with OGI	e.g. Yes	e.g. January, February, and March
0	0	0 NA	0	7/21/2017 NA	NA	NA	NA	OGI Camera	Completed FUR certification course, 5+ years of OGIH experts NA	NA	NA
0	0	0 NA	0	7/21/2017 NA	NA	NA	NA	OGI Camera	Completed FUR certification course, 5+ years of OGIH experts NA	NA	NA